				(Columr	1 1)	(Colu	ımn 2)	T	PE 🗆		OR	SMALL	ENTITY	
	T	OTAL CLAIMS	;					[RATE	FEE']	RATE	FEE	
P17-04	F	OR RC		NUMBER	FILED	NUME	BER EXTRA	В	BASIC FEE 370.00			BASIC FEE	740.00	
	TO	OTAL CHARGE	ABLE CLAIMS	minus 20=					X\$ 9=		OR	X\$18=		
	INI	DEPENDENT C	LAIMS ,	m	inus 3 =	*			X42=		OR	X84=		
	M	JLTIPLE DEPE	NDENT CLÁIM P	RÉSENT					+140=	,	OR			
	* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL											TOTAL		
		C	LAIMS AS A		OTHER THAN									
			(Column 1)		(Colur	nn 2)	(Column 3)	S	MALL E	ENTITY	OR	SMALL	ENTITY	
	ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAI FEE	
/	MQN	Total	* 4	Minus	** 2	_0	=	:	X\$ 9=		OR	X\$18=		
1/2	AMENDMENT	Independent	. /	Minus	***	4	= \		X42=		OR	X84=	/	
	L	FIRST PRESE	NTATION OF MU	JETIPLE DEF	PENDENT CLAIM				-140=		OR	+280=	``\	
								ADI	TOTAL DIT. FEE		OR ADDIT. FEE			
	AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUŞLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
		Total	*	Minus	**		=	>	(\$ 9=	OF		X\$18=		
		Independent	*	Minus	***	· · · ·	=	;	K42 =		OR	X84=	•	
		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										-		
								L	140=		OR	+280=		
								ADİ	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
			(Column 1)		(Colun	nn 2)	(Column 3)		•					

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

(Column 1)

CLAIMS AS FILED - PART I

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

CLAIMS

REMAINING

AFTER

AMENDMENT

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

Minus

Minus

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

HIGHEST

NUMBER

PREVIOUSLY

PAID FOR

**

PRESENT

EXTRA

=:

OR

OR

OR

OR

ADDI-

TIONAL

FEE

RATE

X\$ 9=

X42=

+140=

ADDIT. FEE

TOTAL

Application or Docket Number

OTHER THAN

TIONAL FEE

TIONAL FEE

ADDI-

TIONAL

FEE

RATE

X\$18=

X84=

+280=

ADDIT. FEE

TOTAL

SMALL ENTITY

TYPE

Total

Independent

BEST AVAILABLE COPY

										Application or Docket Number						
	PATENT A	APPLICATIO		RD	803-1003											
		Effect		l	<u> 0087</u>	<u>7'</u>										
CLAIMS AS FILED - PART I (Column 1) (Column 2)											OR	OTHER SMALL				
TC	TAL CLAIMS		9:17				RATE			FEE		RATE	FEE			
FO	R		NUMBER	FILED	NUMBER EXTRA			BASIC FEE		370.00 OR		BASIC FEE	740.00			
τo	TAL CHARGEA	BLE CLAIMS	13 min	us 20=	· ø			X\$ 9=			OR	X\$18=	··			
IND	EPENDENT CL	AIMS	4 minus 3 = *			/- X4			X42=			X84=	84			
MULTIPLE DEPENDENT CLAIM PRESENT								+140			OR		-/-			
t If the difference in column 1 is loss than they are contact follows.									= L		OR	+280=	280			
* If the difference in column 1 is less than zero, enter "0" in column 2											OR	TOTAL				
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)										ENTITY	OTHER THAN OR SMALL ENTITY					
	·	(Column 1) CLAIMS		HIGH	EST	(Column 3)	. 1	O.III.Co		ADDI-			ADDI-	l		
AMENDMENT A		REMAINING AFTER		PREV	IBER OUSLY	PRESENT EXTRA		RATE	:	TIONAL		RATE	TIONAL			
Z	Total " -	AMENDMENT		PAID	FOR		l		-	FEE			FEE			
		. 8//	Minus	** ol	<i>W</i> 77.	-		X\$ 9			OR	X\$18=				
¥	Independent	* <i>4</i>	Minus 4 ULTIPLE DEPENDENT CLAIM				X42				OR	X84=				
	<u> </u>			+140	,		OR	+280=								
	A Committee of the Comm								AL		OA	TOTAL				
			-	ADDIT. FEE				ADDIT. FEE		1						
		(Column 1) CLAIMS			imn 2) (Column 3) HEST MBER PRESENT EXTRA			_	-	ADDI-	1		4001	l		
18		REMAINING AFTER						RATE		TIONAL		RATE	ADDI- TIONAL	l		
		AMENDMENT		PAID					FEE				FEE			
Ş	Total	1/4/	Minus ** \$20 %			6	X\$ 9=				OR	X\$18=				
AMENDMENT.B	Independent	. 94	Minus *** 4 = 3				I	X42=			OR	X84=				
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ı	+140:		•		+280=					
						•		+140: TOT			OR					
	C	•					,	ADDIT. FI			OR	TOTAL ADDIT. FEE		•		
	(Column 1) (Column 2) (Column 3)									_						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM	HEST ABER OUSLY FOR	PRESENT EXTRA		RATE		ADDI-		RATE	ADDI-			
										TIONAL FEE			TIONAL			
	Total	. 8	Minus	- 2	620	. —		X\$ 9=			OR	X\$18=	7			
	Independent	• /	Minus	***	94	= —	ł	X42=	1	/ -		X84=	/			
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT CLAIM			ł		4	/	OR		/				
	+140=											+280=	/			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAY TOTAY ADDIT. F9E OR											TOTAL ADDIT. FER					
""If the "Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.																
1														1		

FORM PTO-875 (Rev. 8/01)

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